

“Taking the Pulse of Jefferson Primary Care: Provider and Team Wellness Survey Results and Next Steps”

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Welcome to all of our Center City Family Medicine and Internal Medicine Colleagues

- ▶ Commitment from the Primary Care leaders and Jefferson to the well-being of all the providers and staff working in Primary Care
 - ▶ Many of the studies in the literature focus on the providers and less on all of the members of the primary care team
- ▶ Agenda for today
 - ▶ Context (Randa Sifri)
 - ▶ Results (Amy Cunningham)
 - ▶ Action Steps (Keith Sweigard)
 - ▶ Q&A
- ▶ George Valko, MD, and Larry Ward, MD, MPH, FACP, to identify forums in FM and IM where additional discussion and feedback will occur

Primary Care Provider and Team Wellness Survey

Supported through:

- ▶ JeffBeWell HRSA grant, 7/1/19-6/30/24 (initial PI, Chris Arenson)

- ▶ 3 Objectives:
 1. Expand/Enhance Integrated Behavioral Health in Primary Care (Marschilok, Rene)
 2. Expand/Enhance Treatment for Opioid Use Disorder in Primary Care (Weinstein)
 3. **Assess and Improve Primary Care Provider and Team Wellness (Sifri)**
 - Jefferson Center City: 3 FM practices and 10 IM practices (n=326)
 - Jefferson Abington
 - Jefferson Northeast
 - Jefferson New Jersey

Context

- ▶ Survey initially delayed due to COVID and roll out of COVID vaccine
 - ▶ COVID in-depth interviews (qualitative study, led by Erin Kelly, PhD) with 33 primary care team members across 8 practices in JH from May to July, 2020; data analysis is completed, now preparing for Round 2 of interviews
- ▶ Competing initiatives at the time of the quantitative survey:
 - ▶ EPIC roll out in Jefferson Abington and Northeast
 - ▶ TJU/AMA survey distributed to all Center City providers almost exactly at the same time as our survey (not just primary care)



NATIONAL ACADEMY of MEDICINE

Valid and Reliable Survey Instruments to Measure Burnout, Well-Being, and Other Work-Related Dimensions

A key organizational strategy to improving clinician well-being is to measure it, develop and implement interventions, and then re-measure it. A variety of dimensions of clinician well-being can be measured including burnout, engagement, and professional satisfaction. Below is a summary of established tools to measure work-related dimensions of well-being. Each tool has advantages and disadvantages and some are more appropriate for specific populations or settings. This information is being provided by the [Research, Data, and Metrics Working Group](#) of the National Academy of Medicine [Action Collaborative on Clinician Well-Being and Resilience](#).

<https://nam.edu/valid-reliable-survey-instruments-measure-burnout-well-work-related-dimensions/>

Survey Items and Distribution

Plan is to use same survey every 6 months!

Survey Items (30)

- ▶ Demographic items (5): Did not differentiate between FM and IM, but will do so in next survey
- ▶ Perceived Stress Reactivity Subscale (4)
- ▶ Abbreviated Maslach Burnout Inventory (9)
- ▶ Mini-Z Burnout Survey (10)
- ▶ Rating of work-related wellness (scale of 1-10)
- ▶ Open-ended question: What is one thing that would improve your work-related wellness?

Survey Distribution

- ▶ Emailed to primary care providers and staff February 8-15; reminders sent two weeks later

Results

- ▶ **429 of 1155** potential respondents completed the survey, for a **37%** response rate
- ▶ Response rates by campus:
 - ▶ Jefferson Northeast: $122/209 = 58\%$
 - ▶ Jefferson Center City: $124/326 = 38\%$
 - ▶ Jefferson New Jersey: $75/203 = 37\%$
 - ▶ Jefferson Abington: $69/417 = 17\%$
 - ▶ 39 did not specify campus



Survey February 2021

1. Sex
 - A. Male
 - B. Female
 - C. Other
 - D. Prefer not to answer
 2. Age
 - A. 18-24
 - B. 25-33
 - C. 34-44
 - D. 45-54
 - E. 55+
 - F. Prefer not to answer
 3. Role: Select the one that best applies (drop downs for questions 3-6)
 - A. |
 4. If Clinical Provider: What percentage of your time is spent on direct patient care? (not including charting and follow-up EHR work)
 - A. 0-30%
 - B. 31-50%
 - C. 51-80%
 - D. >80%
 5. What is the percentage of your official work week is spent working from home?
 - A. 0-25%
 - B. 25-50%
 - C. 50-75%
 - D. 75-100%.
-
6. When I want to relax after a hard day at work...
 - A. This is usually quite difficult for me
 - B. I usually succeed
 - C. I generally have no problem at all
 7. When I have spare time after working hard...
 - A. It is often difficult for me to unwind and relax
 - B. I usually need some time to unwind properly
 - C. I am usually able to unwind effectively and forget about the problems of the day
 8. When I am under stress...
 - A. I usually can't enjoy my leisure time at all
 - B. I usually have difficulty enjoying my leisure time
 - C. I usually enjoy my leisure time
 9. When tasks and duties accumulate to the extent that they are hard to cope with...
 - A. My sleep is unaffected
 - B. My sleep is slightly` ` disturbed
 - C. My sleep is very disturbed

10. (Please place a check in the box of your selection)

	Every day (6)	A few times a week	Once a week	A few times a month	Once a month	A few times a year	Never (0)
Working with people all day is really a strain for me							
I feel emotionally drained from my work							
I feel fatigued when I get up in the morning and have to face another day on the job							
I feel I'm positively influencing other people's lives through my work							
I deal very effectively with the problems of my patients							
I feel exhilarated after working closely with my patients							
I've become more callous towards people since I took this job							
I don't really care what happens to some patients							
I feel I treat some patients as if they were impersonal objects							

Survey February 2021

11. Overall, I am satisfied with my current job:

- A. Strongly disagree
- B. Disagree
- C. Neutral
- D. Agree
- E. Strongly Agree

12. I feel a great deal of stress because of my job:

- A. Strongly disagree
- B. Disagree
- C. Neutral
- D. Agree
- E. Strongly Agree

13. My control over my workload is:

- A. Poor
- B. Marginal
- C. Satisfactory
- D. Good
- E. Optimal

14. Sufficiency of time for documentation is:

- A. Poor
- B. Marginal
- C. Satisfactory
- D. Good
- E. Optimal

15. Which option best describes the atmosphere in your primary work area?

- A. Calm
- B. Busy, but reasonable
- C. Hectic, chaotic

16. My professional values are well aligned with those of my practice leaders:

- A. Strongly Disagree
- B. Disagree
- C. Neither agree nor disagree
- D. Agree
- E. Strongly Agree

17. The degree to which my care team works efficiently together is:

- A. Poor
- B. Marginal
- C. Satisfactory
- D. Good
- E. Optimal

18. The amount of time I spend on the electronic health record (EHR) at home is:

- A. Excessive

- B. Moderately high
- C. Satisfactory
- D. Modest
- E. Minimal/none

19. My proficiency with EHR use is:

- A. Poor
- B. Marginal-6
- C. Satisfactory
- D. Good
- E. Optimal

20. How would you rate your work-related wellness? *(please circle your answer selection)*

Very Poor											Outstanding
1	2	3	4	5	6	7	8	9	10		

21. What is one thing that would improve your work wellness?



Demographics Results



Sex

<u>Sex</u>	<u>Number</u>	<u>Percent</u>
Female	348	81.1
Male	70	16.3
Other (please specify)	1	0.2
Missing	10	2.3

Age

<u>Age Range</u>	<u>Number</u>	<u>Percent</u>
18-24	8	1.9
25-33	77	17.9
34-44	129	30.1
45-54	116	27.0
55+	87	20.3
Prefer not to say	3	0.7
Missing	9	2.1

Campus

<u>Campus</u>	<u>Frequency</u>	<u>Percent</u>
Center City	124	28.9
Northeast	122	28.4
Abington	69	16.1
New Jersey	75	17.5
Missing	39	9.1

Race/Ethnicity

<u>Race</u>	<u>Number</u>	<u>Percent</u>
White	284	66.2
Black or African American	57	13.3
Asian	37	8.6
Hispanic, Latino, or Spanish origin	26	6.1
American Indian or Alaska Native	2	0.5
Other (please specify)	10	2.3
Missing	13	3.0

Role

<u>Role</u>	<u>Number</u>	<u>Percent</u>
Physician	117	29.4
Medical Assistant	105	26.4
Billing/Registration/Schedulers/Referral	54	12.8
Administrator/Office Manager/Financial	51	11.9
Nurse Practitioner/Behavioral Health Consultant	24	5.6
Care Managers/Coordinator	14	3.3
Administrative Assistant	12	2.8
Research Coordinators/Phone Room/Medical Records	8	1.9
Quality Staff	7	1.6
Nurse	6	1.4
Missing	31	7.2

Burnout and Wellness Results



- For each measure, examined overall average scores, as well as differences by all demographic categories

Prolonged Reactivity Subscale

(When you get home... Can you shut work down?)

- Subscale of the Perceived Stress Reactivity Scale
- For each item:
 - scored 0 if infrequent/no difficulty disconnecting from work stress;
 - 1 if some difficulty
 - 2 if frequent difficulty

1. When I want to relax after a hard day at work...

1. This is usually quite difficult for me
2. I usually succeed
3. I generally have no problem at all

2. When I have spare time after working hard...

1. It is often difficult for me to unwind and relax
2. I usually need some time to unwind properly
3. I am usually able to unwind effectively and forget about the problems of the day

3. When I am under stress...

1. I usually can't enjoy my leisure time at all
2. I usually have difficulty enjoying my leisure time
3. I usually enjoy my leisure time

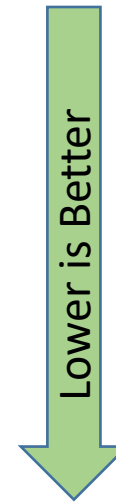
4. When tasks and duties accumulate to the extent that they are hard to cope with...

1. My sleep is unaffected
2. My sleep is slightly disturbed
3. My sleep is very disturbed

Prolonged Reactivity Subscale Results

- Score ranges from 0-8; *higher score indicates prolonged reactivity*
- **Overall mean (SD): 3.89(1.55)**; slightly higher than prior studies
- Significant differences by age ($p<.001$) only; consistent with prior research:

<u>Age Range</u>	<u>N</u>	<u>Mean</u>	<u>SD</u>
18-24	3	4.67	0.58
25-33	64	4.28	1.61
34-44	111	4.23	1.46
45-54	99	3.58	1.49
55+	77	3.4	1.56
Prefer not to say	2	5	0



Maslach Burnout Inventory (MBI)

- Original MBI: 22 items measuring three dimensions:
 - Emotional Exhaustion
 - Personal Accomplishment
 - Depersonalization
- JMG: Used an abbreviated MBI (aMBI): 9 items measuring same three dimensions
- The MBI creators view burnout as a continuum
 - The MBI manual does not recommend using a dichotomous burnout score; rather, scores for each subscale should be reported
 - *Scored 0-18.*
 - *Higher scores on Emotional Exhaustion and Depersonalization are indicators of burnout.*
 - *Lower score on Personal Accomplishments is an indicator of burnout.*

Abbreviated Maslach Burnout Inventory

	Every day (6)	A few times a week (5)	Once a week (4)	A few times a month (3)	Once a month (2)	A few times a year (1)	Never (0)	
Working with people all day is really a strain for me								Emotional Exhaustion (0-18)
I feel emotionally drained from my work								
I feel fatigued when I get up in the morning and have to face another day on the job								
I feel I'm positively influencing other people's lives through my work								Personal Accomplishment (0-18)
I deal very effectively with the problems of my patients								
I feel exhilarated after working closely with my patients								
I've become more callous towards people since I took this job								Depersonalization (0-18)
I don't really care what happens to some patients								
I feel I treat some patients as if they were impersonal objects								

Lower is Better →

← Higher is Better

Lower is Better →

aMBI Results

- **Emotional exhaustion** had normal distribution:
 - Mean (SD) = 9.11(5.25) out of 18
- **Depersonalization** highly skewed towards low depersonalization:
 - Median(IQR) = 1.00(4.00) out of 18
- **Personal accomplishment** highly skewed towards high levels of accomplishment:
 - Median(IQR) = 15.00 (4.00) of 18

Lower emotional exhaustion and depersonalization and higher personal accomplishment compared to prior studies using aMBI

McManus IC, Keeling A, Paice E. Stress, burnout and doctors' attitudes to work are determined by personality and learning style: a twelve year longitudinal study of UK medical graduates. BMC medicine. 2004 Dec;2(1):1-2.

Zuraida AS, Zainal NZ. Exploring burnout among Malaysian junior doctors using the abbreviated Maslach Burnout Inventory. Malaysian Journal of Psychiatry. 2015;24(1).

aMBI differences by Campus

- Significant differences in emotional exhaustion ($p=.003$) and depersonalization ($p=.03$) by campus

Emotional Exhaustion

<u>Campus</u>	<u>N</u>	<u>Mean</u>	<u>SD</u>
Jefferson Abington	61	11.62	4.56
Jefferson Northeast	100	9.12	5.48
Jefferson Center City	114	9.01	4.8
Jefferson New Jersey	58	7.34	5.42

Better

Depersonalization

<u>Campus</u>	<u>N</u>	<u>Median</u>	<u>IQR</u>
Jefferson Center City	114	2	5
Jefferson New Jersey	61	1	4
Jefferson Northeast	100	1	4
Jefferson Abington	58	0	3

aMBI Differences by Role

- Significant differences in depersonalization and personal accomplishment by role

Depersonalization

<u>Role</u>	<u>Number</u>	<u>Median</u> ★	<u>IQR</u>
Nurse	5	3.00	3.50
Physician	108	3.00	5.00
Care Managers/Coordinator	12	2.50	5.00
Administrative Assistant	8	1.00	6.00
Administrator/Office Manager/Financial	43	1.00	3.00
Nurse Practitioner/Behavioral Health Consultant	18	1.00	4.25
Billing/Registration/Schedulers/Referral	44	0.50	3.00
Coordinators/Phone Room/Medical			
Records/Research Coordinator	5	0.00	0.50
Medical Assistant	84	0.00	3.00
Quality Staff	7	0.00	1.00

Personal Accomplishment

<u>Role</u>	<u>Number</u>	<u>Median</u> ★	<u>IQR</u>
Administrative Assistant	8	13.00	9.00
Billing/Registration/Schedulers/Referral	42	14.00	5.00
Nurse Practitioner/Behavioral Health Consultant	17	14.00	2.50
Administrator/Office Manager/Financial	43	15.00	4.00
Medical Assistant	89	15.00	2.75
Physician	108	15.00	3.00
Care Managers/Coordinator	12	15.00	2.75
Nurse	5	16.00	4.50
Quality Staff	7	17.00	6.00
Coordinators/Phone Room/Medical			
Records/Research Coordinator	6	17.50	4.50

Mini-Z 2.0 Burnout Assessment Survey

- 10-item assessment developed by Mark Linzer, MD; adopted by AMA as part of their Steps Forward program
- Assesses seven **drivers** of burnout and three **outcomes**:
 - **Drivers**: work control, work chaos, teamwork, values alignment with leadership, documentation time pressure, EMR use at home, and EMR proficiency
 - **Outcomes**: burnout (correlates with Emotional Exhaustion MBI subscale), stress and satisfaction

Linzer M, Poplau S, Babbott S, Collins T, Guzman-Corrales L, Menk J, Murphy ML, Ovington K. Worklife and wellness in academic general internal medicine: results from a national survey. Journal of general internal medicine. 2016 Sep;31(9):1004-10.

Linzer M, Smith CD, Hingle S, Poplau S, Miranda R, Freese R, Palamara K. Evaluation of Work Satisfaction, Stress, and Burnout Among US Internal Medicine Physicians and Trainees. JAMA Network Open. 2020 Oct 1;3(10):e2018758-.

Figure. Mini Z 2.0 Survey^a

1. Overall, I am satisfied with my current job.	5. Agree strongly	4. Agree	3. Neither agree nor disagree	2. Disagree	1. Strongly disagree
2. Using your own definition of burnout, please choose one of the numbers below:					
5. I enjoy my work. I have no symptoms of burnout.					
4. I am under stress, and don't always have as much energy as I did, but I don't feel burned out.					
3. I am beginning to burn out and have one or more symptoms of burnout, eg, emotional exhaustion.					
2. The symptoms of burnout that I'm experiencing won't go away. I think about work frustrations a lot. ^b					
1. I feel completely burned out. I am at the point where I may need to seek help. ^b					
3. My professional values are well aligned with those of my clinical leaders.	5. Agree strongly	4. Agree	3. Neither agree nor disagree	2. Disagree	1. Strongly disagree
4. The degree to which my care team works efficiently together is:					
1. Poor	2. Marginal	3. Satisfactory	4. Good	5. Optimal	
5. My control over my workload is:					
1. Poor	2. Marginal	3. Satisfactory	4. Good	5. Optimal	
6. I feel a great deal of stress because of my job.					
1. Agree strongly	2. Agree	3. Neither agree nor disagree	4. Disagree	5. Strongly disagree	
7. Sufficiency of time for documentation is:					
1. Poor	2. Marginal	3. Satisfactory	4. Good	5. Optimal	
8. The amount of time I spend on the electronic medical record (EMR) at home is:					
1. Excessive	2. Moderately high	3. Satisfactory	4. Modest	5. Minimal/none	
9. The EMR adds to the frustration of my day.					
1. Agree strongly	2. Agree	3. Neither agree nor disagree	4. Disagree	5. Strongly disagree	
10. Which number best describes the atmosphere in your primary work area?					
Calm		Busy, but reasonable		Hectic, chaotic	
5	4	3	2	1	

Total score ranges from
10-50 (higher is better):

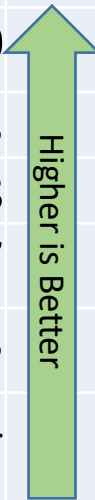
40 or higher associated
with a “joyous workplace”

Overall Mini-Z Score

- **Mean (SD):** 32.09 (SD 3.99) out of 50
 - AMA maintains national database of MD scores: benchmark mean = 29-32
 - No benchmarks for other healthcare professions
- **Joyous Workplace (score of 40 or above):** 8 (1.9%)
 - Compared with 11% in national sample
- ***Large number of missing responses (72-79):*** Admin staff, ~20 MAs, a few physicians

Overall Mini-Z Score by Role

<u>Role</u>	<u>N</u>	<u>Mean</u>	<u>SD</u>
Coordinators/Phone Room/Medical Records/Research Coordinator	6	36.00	2.19
Care Managers/Coordinator	13	34.62	2.14
Administrative Assistant	8	34.50	3.25
Quality Staff	7	34.43	4.31
Medical Assistant	90	34.38	3.43
Administrator/Office Manager/Financial	41	33.07	2.94
Billing/Registration/Schedulers/Referral	42	32.93	2.44
Nurse Practitioner/Behavioral Health Consultant	17	31.24	2.46
Physician	109	29.03	3.57
Nurse	5	28.80	4.97



Overall Satisfaction with Current Job

Overall, I am satisfied with my current job:

	N = 355	
	Frequency	Percent
Strongly disagree	18	5.1
Disagree	44	12.4
Neutral	86	24.2
Agree	147	41.4
Strongly agree	60	16.9

58.3%

Using Your Definition of Burnout

Using your own definition of
"burnout", please select one of the answers below:

N = 429

	Frequency	Percent
I enjoy my work. I have no symptoms of burnout	49	11.4
I am under stress, and don't always have as much energy as I did, but I don't feel burned out	135	31.5
I am definitely burning out and have one or more symptoms of burnout	113	26.3
The symptoms of burnout that I am experiencing won't go away. I think about work frustrations a lot	39	9.1
I feel completely burned out. I am at the point where I may need to seek help	21	4.9
Total	357	83.2
Missing	72	16.8

48.4%;
MDs 52%

Professional Values Well-Aligned with Practice Leaders

My professional values are well aligned with those of my practice leaders:

N = 356			
	Frequency	Percent	
Strongly disagree	23	6.4	} 59%
Disagree	44	12.4	
Neither agree nor disagree	79	22.2	
Agree	148	41.6	
Strongly agree	62	17.4	

Degree to which my care team works together efficiently

The degree to which my care team works efficiently together is:

N = 354			
	Frequency	Percent	
Poor	20	5.6	} 84%
Marginal	37	10.5	
Satisfactory	99	28.0	
Good	165	46.6	
Optimal	33	9.3	

I Feel a Great Deal of Stress

I feel a great deal of stress
because of my job:

N = 357

	Frequency	Percent
Strongly disagree	19	5.3
Disagree	54	15.1
Neutral	109	30.5
Agree	114	31.9
Strongly agree	61	17.1

49%

The Amount of Time I Spend on the EHR

The amount of time I spend on the electronic health record (EHR) at home is:

N = 352			
	Frequency	Percent	
Excessive	27	7.7	} 72.8%
Moderately high	69	19.6	
Satisfactory	40	11.4	
Modest	45	12.8	
Minimal/none	171	48.6	

Sufficiency of Time for Documentation

Sufficiency of time for documentation is:		
N = 354		
	Frequency	Percent
Poor	58	16.4
Marginal	75	21.2
Satisfactory	111	31.4
Good	91	25.7
Optimal	19	5.4

} 62.5%

Atmosphere in Primary Work Area

Which option best describes
the atmosphere in your
primary work area?

N = 355

	Frequency	Percent
Calm	21	5.9
Busy, but reasonable	240	67.6
Hectic, chaotic	94	26.5

} 79.4%

Control over Workload

My control over my workload is:		
N = 356		
	Frequency	Percent
Poor	46	12.9
Marginal	68	19.1
Satisfactory	112	31.5
Good	114	32.0
Optimal	16	4.5

} 68%

Proficiency with EHR Use

My proficiency with EHR use is:		
N = 350		
	Frequency	Percent
Poor	7	2.0
Marginal (6)	23	6.6
Satisfactory	68	19.4
Good	157	44.9
Optimal	95	27.1

} 91.4%

How would you rate your work-related wellness (1-10)?

- Overall mean (standard deviation): 5.85(2.45)
- Significant differences by campus ($p<.001$), role ($p=.007$)

<u>Campus</u>	<u>N</u>	<u>Mean</u>	<u>SD</u>
Jefferson New Jersey	61	6.72	2.009
Jefferson Center City	113	6.18	2.280
Jefferson Northeast	101	5.52	2.697
Jefferson Abington	58	4.52	2.281



<u>Role</u>	<u>Number</u>	<u>Mean</u>	<u>SD</u>
Coordinators/Phone Room/Medical Records/Research Coordinator	6	7.33	2.16
Care Managers/Coordinator	13	6.69	2.39
Medical Assistant	90	6.58	2.51
Quality Staff	7	6.29	1.80
Billing/Registration/Schedule ers/Referral	45	6.00	2.88
Nurse Practitioner/Behavioral Health Consultant	18	5.56	2.04
Administrator/Office Manager/Financial	46	5.50	2.33
Physician	109	5.35	2.22
Administrative Assistant	8	4.75	3.15
Clinical Support: Nurse	5	4.00	1.58



What is one thing that would improve your work-related wellness? (Center City overall)



1. Less emphasis on staffing than in overall sample
2. Similar themes related to staff, time, and better communication/teamwork as in overall responses

Center City Physicians



1. **Time:** More time with patients and for administrative tasks
2. **Staff:** More staff to assist with administrative work such as patient messages
3. **Communication:** More communication/sharing of resources/respect from leadership, better team communication

Center City Medical Assistants



- 1) **Teamwork:** Support from coworkers, “healthy work environment”
- 2) **Time:** Uninterrupted admin time
- 3) **Staff:** more support staff

Center City Nurse Practitioners, Nurses, Care Managers/Coordinators, Behavioral Health Consultants, Quality



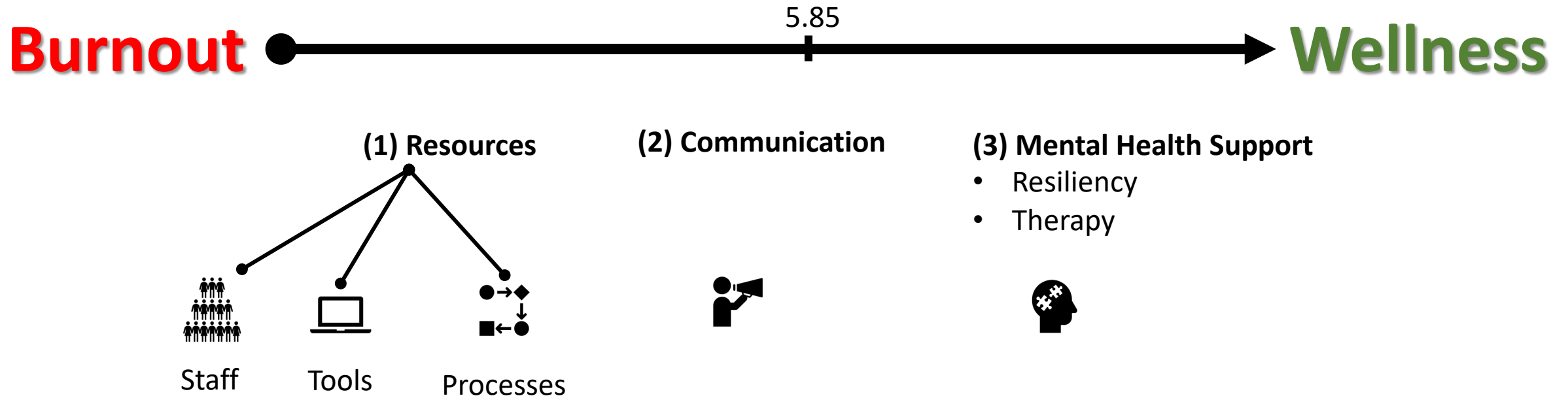
- 1) **Work flows:** Improved work flows/teamwork
- 2) **Flexibility:** In scheduled and work location
- 3) **Staff:** More staff

Center City Administrative Assistant, Office Manager, Billing, Phone Room, Scheduling, Records, Research



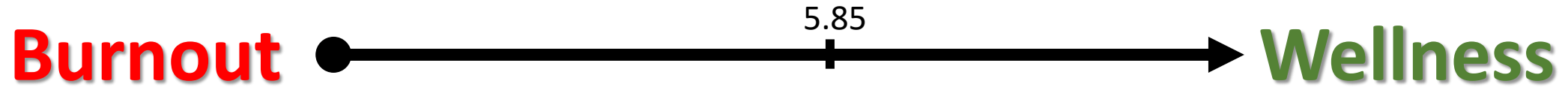
- 1) **Staff:** Additional staff
- 2) **Communication:** Better communication about changes, among team members
- 3) **Flexibility:** In scheduling and work location

Action Plans:



Action Plans:

(1) Commit to Essential Resources



- Fill Vacant Staff Positions (MAs and PT Registrars / phone staff)!
 - Recruitment
 - Recruitment Bonus
 - Jeff Temps
 - Partner with MA schools / Externships
 - Consider restart enhanced MA program
 - Retention
 - Exit and Stay Interviews
 - Recognition opportunities
 - Add Value for staff: (ex: MA educational Sessions)
 - Support Overtime pay for staff (if interested) including meetings

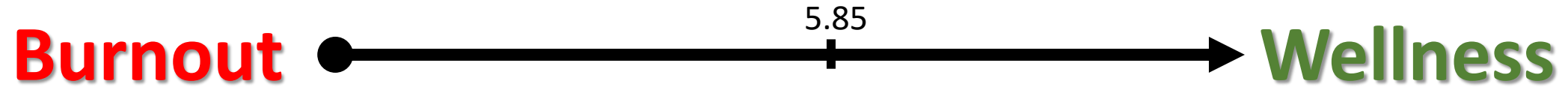
JH Center City Best Practice
• *JIMA: fully participate in screening future colleagues*

Vacancy Status Jefferson CC Primary Care

Count of Job ID	Column Labels																
Row Labels	Admin Assistant	Asst Professor	Behavioral Health Consultant	Medical Assistant I	Medical Assistant II	Nurse Clinical Coord	Nurse Practitioner	Office Manager II	PA Primary Care	Pat Registrar II	Pat Registrar III	Pat Registrar IV	Social Worker	Sr Research Investigator	Staff Nurse	Team Medical Associate	Grand Total
Family and Community Medicine	1		1	3		2					1		1	1		1	11
Internal Medicine		1		2					1	2					1		7
Internal Medicine - Bala				2				1							1		4
JCP FAMILY MEDICINE CHINATOWN					1												1
Jeff Medical Care - Art Museum							1										1
Med Jeff Womens PC															1		1
Navy Yard Ambulatory Practice					2							1					3
Grand Total	1	1	1	7	3	2	1	1	1	2	1	1	1	1	3	1	28
				10						4							

Action Plans:

(1) Commit to Essential Resources

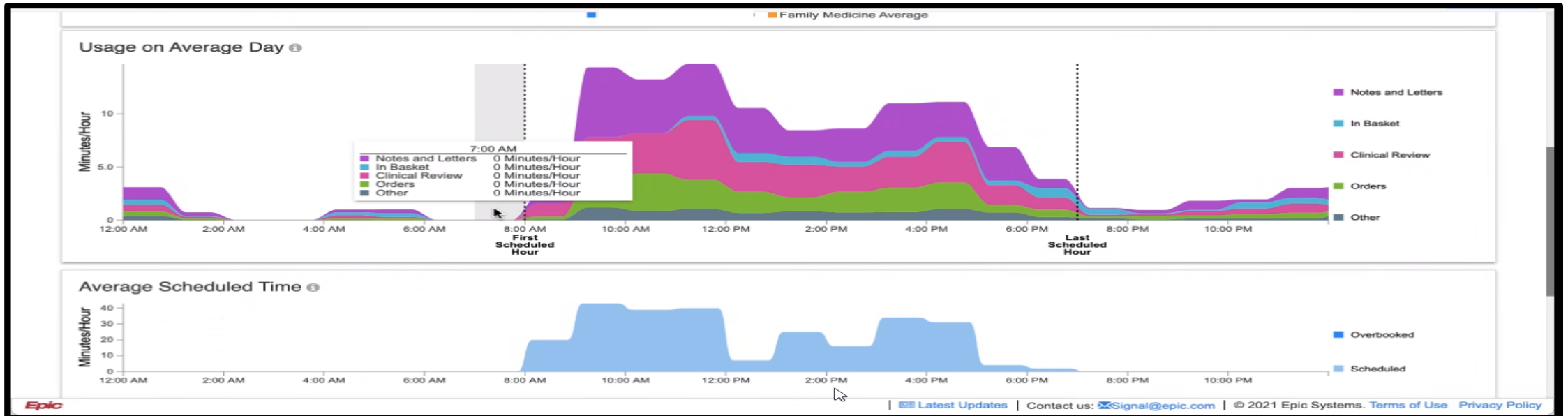
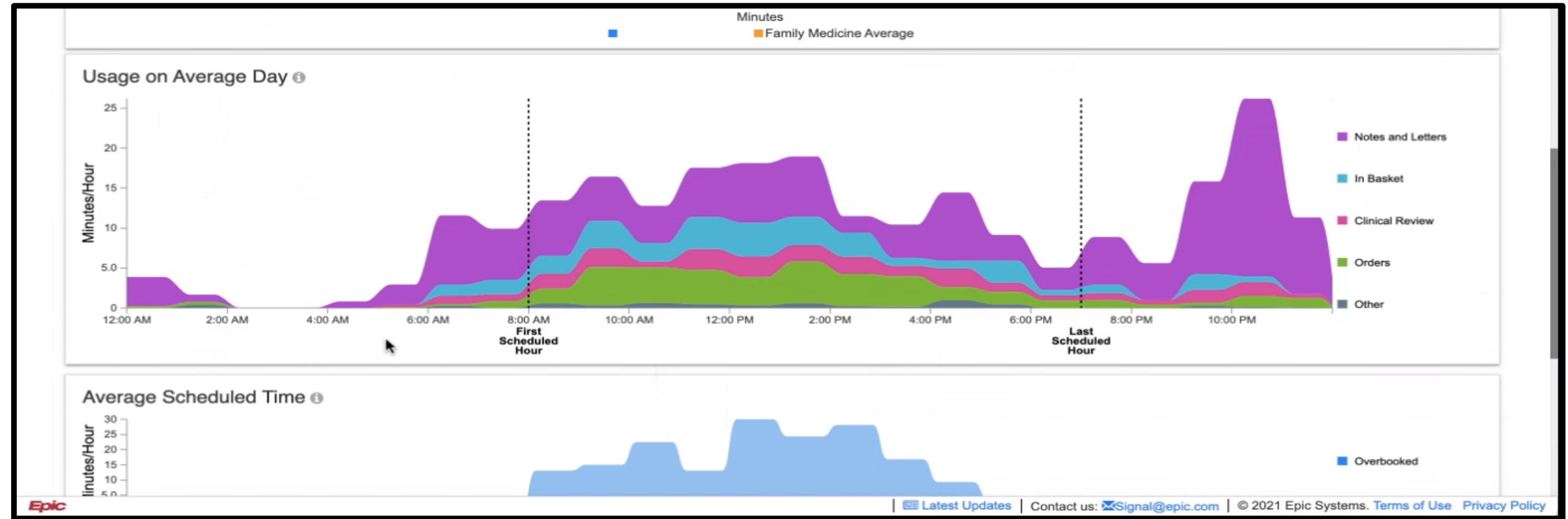


- Tools & Process Issues
 - Scheduling
 - Seamless access errors
 - Lack of control over schedule (physicians)
 - Reduce EMR Burden, Redesign Workflow
 - My Chart messages and inbox
 - **Re-evaluate message workflow for physicians and support staff**
 - **Added Skill set – RNs Triage.**
 - CC: “All large/medium practices have RN(s)”
 - Regular mentorship for improved efficiency – All Roles
- Personal Safety: COVID PPE

JH Center City Best Practice

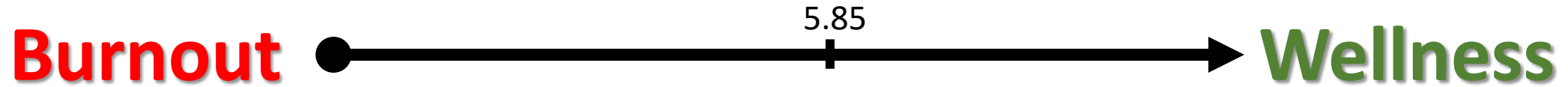
- *JFMA: Redesign of inbox workflow*

EPIC Signal Application



Action Plans:

(2) Enhance Communication



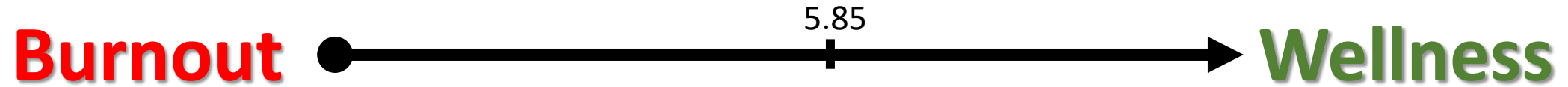
- SR Admin Aware & Engaged
- Practice Visits (Virtual and In-Person)
- Create Venues & Flatten Hierarchy
 - Huddles (Brief & Debrief)
 - *Resume CPC+ Weekly Team Meetings*
 - Office Business Meetings (IM/FM)
 - Consider
 - Support Staff Council with Admin & Clinical Leadership
 - Consider Primary Care Townhalls
- Address sensitive content
 - Causes of Staff Vacancies
 - EMR Transition & workflow
 - Pandemic impact
 - Productivity concerns
 - Compensation - Quality vs volume
 - Work life balance

Best Practice:

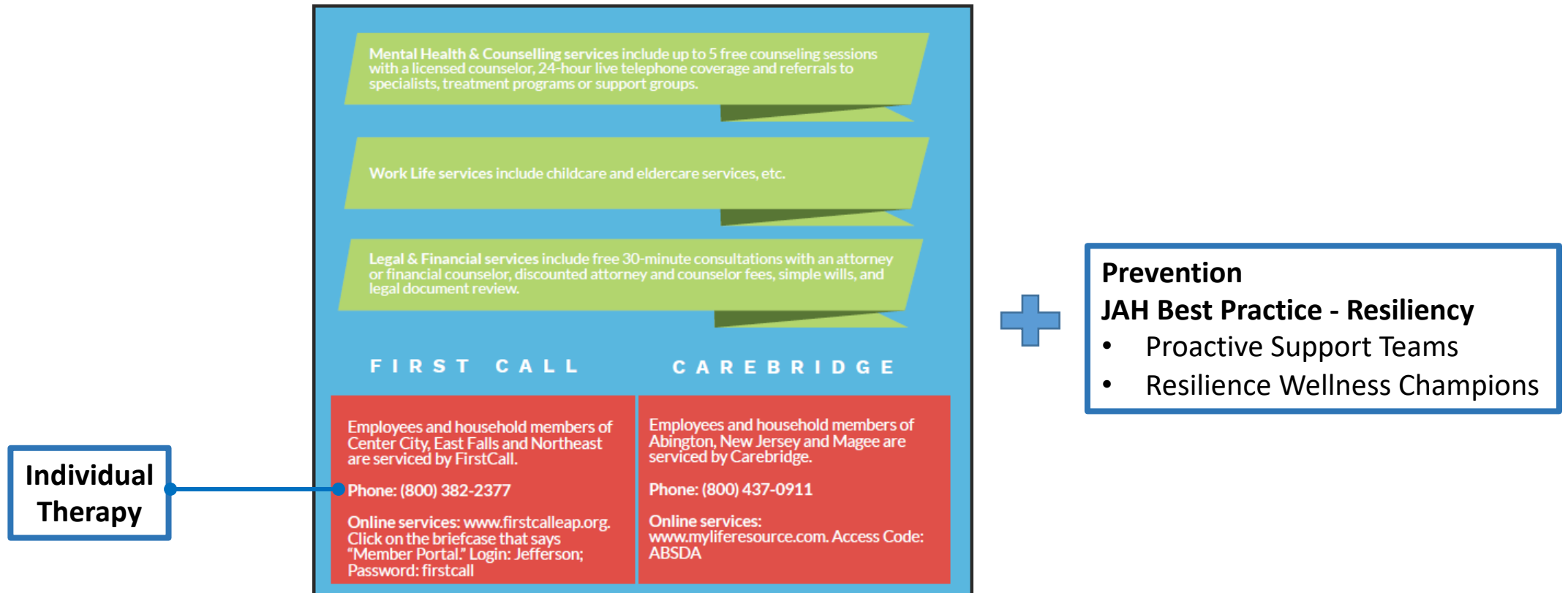
Address Progress, Barriers
and Action Plans...

Action Plans:

(3) Provide Mental Health Support & Resilience



- Partner with Behavioral Health & HR Resources



Employment Wellness = A Balance of a Social Compact

What you give ...

- Adopt Organizational Values (JH)
 - Respect all
 - Do the right thing
 - Be Bold & Innovative
- Maintain Professionalism at all times
- Provide High Quality & Safe Care
- Expand knowledge via continuing education
- Compliance with Citizenship Standards: AMEs, Note Closures, etc
- Achieve reasonable production targets
- Be engaged ...

What you get ...

- Treated with respect and fairness
- Resources for your personal safety
- Resources to perform your job
 - Tools, workflow and skilled support staff required for optimal performance
- Mentoring and coaching
 - Advance Attending Skills
- Market competitive compensation and benefits
- Recognition for achievement of excellence
- Strong honest communication and a voice in governance
- Opportunity to advance in the organization

More Discussion...

WELLNESS AUDIT WILL BE REPEATED EVERY
6 MONTHS.

SEPTEMBER IS NEXT “CHECK IN”